24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NEW REPUBLICAN PAC	
	C C00544544
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
MATSON MEDIA LLC	10 16 2018
Mailing Address 1201 HAMPTON STREET	
SUITE 3B	Amount
City State Zip Code	1997150.77
COLUMBIA SC 29201	Transaction ID : SE.1 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Category/ Type	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
NELSON, BILL, , ,	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Disbu 2018	rsement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
SRCP MEDIA	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 201 N UNION ST	
SUITE 200	Amount
City State Zip Code	18543.00
ALEXANDRIA VA 22314	Transaction ID : SE.2 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION Category/ Type	10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
NELSON, BILL, , ,	President State: FL State:
Calendar Year-To-Date Per Election for Office Sought Disbut 2018	orsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2015693.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	2015693.77
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
DOZIER, JULIE, , , [Electronically Filed] Date	0 17 2018
5.3	